

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Sm</i>		11/15/00
O.I.P.E. CLASSIFIER		10	11/15/00
FORMALITY REVIEW	<i>ES</i>	6743	12/11/00
RESPONSE FORMALITY REVIEW			

09/684,634

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	11/15/00
2	✓	✓	11/15/00
3	✓	✓	11/15/00
4	✓	✓	11/15/00
5	✓	✓	11/15/00
6	✓	✓	11/15/00
7	✓	✓	11/15/00
8	✓	✓	11/15/00
9	✓	✓	11/15/00
10	✓	✓	11/15/00
11	✓	✓	11/15/00
12	✓	✓	11/15/00
13	✓	✓	11/15/00
14	✓	✓	11/15/00
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30	✓	✓	11/15/00
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46	✓	✓	11/15/00
47	✓	✓	11/15/00
48	✓	✓	11/15/00
49	✓	✓	11/15/00
50	✓	✓	11/15/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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